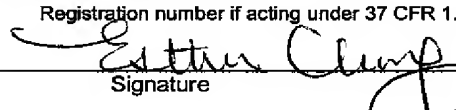


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|---|--|--|---|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2008</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>                                     |  | Docket Number (Optional)<br>3449-0317PUS1  |   |
| Application Number                      10/814,198-Conf. #6429  |  | Filed    April 1, 2004   |   |
| For <b>IMAGE RECORDING AND REPRODUCING APPARATUS AND METHOD</b>   |  |  |   |
| Art Unit                      2621  |  | Examiner                      M. P. Choi   |   |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |  |  |   |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |  |  |   |
|   |  | <u>Fee</u>   | <u>Small Entity Fee</u>                     |
| <input checked="" type="checkbox"/>   | One month (37 CFR 1.17(a)(1))  | \$120  | \$60                      \$ 120.00         |
| <input type="checkbox"/>  | Two months (37 CFR 1.17(a)(2))   | \$460  | \$230                      \$               |
| <input type="checkbox"/>  | Three months (37 CFR 1.17(a)(3))   | \$1050   | \$525                      \$               |
| <input type="checkbox"/>  | Four months (37 CFR 1.17(a)(4))  | \$1640   | \$820                      \$               |
| <input type="checkbox"/>  | Five months (37 CFR 1.17(a)(5))  | \$2230   | \$1115                      \$              |
| <input type="checkbox"/>  | Applicant claims small entity status. See 37 CFR 1.27.   |  |   |
| <input type="checkbox"/>  | A check in the amount of the fee is enclosed.  |  |   |
| <input type="checkbox"/>  | Payment by credit card. Form PTO-2038 is attached.   |  |   |
| <input checked="" type="checkbox"/>   | The Director has already been authorized to charge fees in this application to a Deposit Account.  |  |   |
| <input checked="" type="checkbox"/>   | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number                      02-2448                      . |  |   |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>               |  |  |   |
| I am the  | <input type="checkbox"/>   | applicant/inventor.  |   |
|   | <input type="checkbox"/>   | assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). |   |
|   | <input checked="" type="checkbox"/>  | attorney or agent of record. Registration Number                      40,953   |   |
|   | <input type="checkbox"/>   | attorney or agent under 37 CFR 1.34.   |   |
|   |  | Registration number if acting under 37 CFR 1.34                      _____   |   |
|   | <br>_____<br>Signature  |  | September 15, 2008<br>_____<br>Date         |
|   | Esther H. Chong<br>_____<br>Typed or printed name  |  | (703) 205-8000<br>_____<br>Telephone Number |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |  |  |   |
| <input type="checkbox"/>  | Total of                      1                      forms are submitted.  |  |   |